

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90242 029 ***150.00

DOCUMENT # P93000063202

1. Entity Name

GONZALEZ & SON MOVERS, INC.

Principal Place of Business

14805 SW 124TH PL
 MIAMI FL 33186
 US

Mailing Address

14805 SW 124TH PL
 MIAMI FL 33186
 US

657323



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

13868 SW 90th

3. Mailing Address

13868 SW 90th

Suite, Apt. #, etc.

14201, FL 33176

Suite, Apt. #, etc.

M-101

City & State

Miami

City & State

Miami, FL 33176

4. FEI Number **65-0434875**

Applied For

Not Applicable

Zip

33176

Country

Dade

Zip

33176

Country

Dade

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GONZALEZ, ABRAHAM S
 14805 SW 124TH PL
 MIAMI FL 33186

Name

Gonzalez Abraham

Street Address (P.O. Box Number is Not Acceptable)

13868 SW 90th

City

Miami

FL

Zip Code

33176

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
AFTER MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	GONZALEZ, SABAS R	
STREET ADDRESS	14805 SW 124TH PL	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	ST	<input type="checkbox"/> Delete
NAME	GONZALEZ, ANA G	
STREET ADDRESS	14805 SW 124TH PL	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE	VP	<input type="checkbox"/> Delete
NAME	GONZALEZ, ABRAHAM S	
STREET ADDRESS	14805 SW 124TH PL	
CITY-ST-ZIP	MIAMI FL 33186	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)